## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Franz Schellhorn et al. Art Unit: 2871

Serial No.: 09/868,364 Examiner: Timothy L. Rude
Filed: October 12, 2001 Confirmation No.: 8559
Notice of Allowance Date: December 18, 2009

Title : LIGHT SOURCE ELEMENT WITH LATERAL, OBLIQUE LIGHT INFEED

## MAIL STOP ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

## RESPONSE TO NOTICE OF ALLOWANCE

In response to the Notice of Allowance mailed December 18, 2009, enclosed is a completed issue fee transmittal form PTOL-85b. The fee in the amount of \$1531 for the required issue fee, including patent copies, is being paid herewith on the Electronic Filing System (EFS) by way of Deposit Account authorization.

Please apply any additional charges or credits to our Deposit Account No. 06-1050, referencing Attorney Docket No. 12406-0126001.

Respectfully submitted,

Date: 2/9/10

Marc M. Wefers Reg. No. 56,842

Fish & Richardson P.C. 225 Franklin Street Boston, MA 02110 Telephone: (617) 542-5070

Facsimile: (877) 769-7945

22330288 doc

## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571) 273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (of required). Blocks I through, 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be naited to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address. and/or 10 in indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

26161

7590

12/18/2009

APPLICATION NO.	FILING DATE		FIRST NAME	D INVENTOR	ATTORNEY DOCKET NO	CONFIRMATION NO
09/868,364	10/12/2001		Franz Sc	hellhorn	12406-0126001	8559
TITLE OF INVENTION: LIG	HT SOURCE ELEMENT W	TH LATERAL,	ANGULAR LI	GHT INJECTION		
APPLN. TYPE	SMALL ENTITY	ISSU	E FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$15		\$0	\$1510	03/18/2010
EXAM	INER	ART	UNIT	CLASS-SUBCLASS	7	
RUDE, TIN	10ТНҮ L.	28	71	349-065000	_	
PTO/SB/47; Rev 03-02 or Number is required.  3. ASSIGNEE NAME AND I PLEASE NOTE: Unless ar previously submitted to the	ion (or "Fee Address" Indica more recent) attached. Use of RESIDENCE DATA TO BE a assignee is identified below USPTO or is being submitte	of a Customer  PRINTED ON  no assignee dat ed under separate	agent) and the attorneys or a will be printed THE PATENT ( a will appear on cover. Complet	print or type) the patent. Inclusion of assistion of this form is NOT a sul	pacent aname 3,	n an assignment has been
[ ]"Fee Address" indicate PTO/SB/47; Rev 03-02 or Number is required.  3. ASSIGNEE NAME AND PLEASE NOTE: Unless arpreviously submitted to the (A) NAME OF ASSIGNEE.	ion (or "Fee Address" Indica more recent) attached. Use of RESIDENCE DATA TO BE a assignee is identified below USPTO or is being submitte	e PRINTED ON 7, no assignee dat ed under separate (B)	agent) and the attorneys or a will be printed THE PATENT ( a will appear on cover. Complet ) RESIDENCE (	e names of up to 2 registered gents. If no name is listed, no d.  (print or type) the patent. Inclusion of assi- tion of this form is NOT a sul ICITY and STATE OR COU	pacent aname 3,	
[ ]"Fee Address" indicati PTO/SB/47; Rev 03-02 or Number is required. 3. ASSIGNEE NAME AND! PLEASE NOTE: Unless an previously submitted to the	ion (or "Fee Address" Indica more recent) attached. Use of RESIDENCE DATA TO BE a assignce is identified below USPTO or is being submitted	of a Customer E PRINTED ON V, no assignee dat ed under separate (B)	agent) and the attorneys or a will be printed THE PATENT ( a will appear on cover. Complet RESIDENCE ( anich, German)	e names of up to 2 registered gents. If no name is listed, no. d.  (print or type) the patent. Inclusion of assignion of this form is NOT a sul CITY and STATE OR COU	pacent aname 3,	n an assignment has been
[ 1 "Fee Address" indicase Indicase Indicase Indicase Info Staff Ree 0.3d/0 or Number is required.  3. ASSIGNEE NAME AND INDICASE	ion (or "Fee Address" Induca more recent) altached. Use RESIDENCE DATA TO BE assignee is identified below USPTO or is being submite assignee category or categori nelosed: nall entity discount permitter. Opties 7	of a Customer  E PRINTED ON 7, no assignee dated under separate (B)  Mu  ies (will not be pr	agent) and the attorneys or a will be printed THE PATENT ( a will appear on cover. Complet ) RESIDENCE   anich, German inted on the pat 4b. Payment c [] A chec [] Payment IXI The Di	e names of up to 2 registered gents If no name is listed, no d.  gents If no name is listed, no d.  gents If no leukino of assistion of this form is NOT a sull CITY of the second of this form is NOT as uncompared to the second of this form is NOT as uncompared to the second of this form of the second of the s	patent name 3.  gree data is only appropriate when stitute for filing an assignment.  NTRY)  corporation or other private group is enclosed.	n an assignment has been
[ 1 "Fee Address" indicase TPOSBAYE, Rev 34-02 or Number is required. 3 ASSIGNEE NAME ANDI PLEASE NOTE Unless an previously submitted (V.) NAME OF ASSIGNEE Osram GmbH Please check the appropriate of 14. The following fee(s) are of       Publication Fee (No an	ion (or "Fee Address" Induca more recent) altached. Use RESIDENCE DATA TO BE assignee is identified below USP TO or is being submite assignee category or categorie nelosed: nall entity discount permitte- optes 7	of a Customer  E PRINTED ON ', no assignee dated under separate (B)  Mu dies (will not be pr	agent) and the attorneys or a will be printed will be printed to a will appear on cover. Complete RESIDENCE : anich, German; inted on the path 4b. Payment of Payment (2) The Di Deposit Act	e names of up to 2 registered,  gents If no name is listed, no d.  [print of type]  [print of type]  [print for the patent. Inclusion of assigned of this form is NO I as all  [print for the patent. Inclusion of assigned to the patent.  [print for the patent. Including Inclu	piece data is only appropriate when bestitute for filling an assignment. NTRY)  corporation or other private group is enclosed.  30 % a catached, charge the required fee(s), or cri- lose an extra copy of this form).  MALL ENTITY status. See 37 G	p entity [ ] government has been pentity [ ] government, to
[] The Address' Indianal Prices Address' Indianal Prices Stay Revolucion of Number is required.  3. ASSIGNEE NAME AND IN PRICES ASSIGNEE Unless an previously submitted (Val) NAME OF ASSIGNEE Osram GmbH  Please check the appropriate of the prices of the p	ion (or "Fee Address" Induca more recent) altached. Use RESIDENCE DATA TO BE assignee is identified below USP TO or is being submite assignee category or categorie nelosed: nall entity discount permitte- optes 7	of a Customer  E PRINTED ON ', no assignee dated under separate (B)  Mu dies (will not be pr	agent) and the attorneys or a will be printed will be printed to a will appear on cover. Complete RESIDENCE : anich, German; inted on the path 4b. Payment of Payment (2) The Di Deposit Act	e names of up to 2 registered,  gents If no name is listed, no d.  [print of type]  [print of type]  [print for the patent. Inclusion of assigned of this form is NO I as all  [print for the patent. Inclusion of assigned to the patent.  [print for the patent. Including Inclu	patent anne 3,  name 3,  procedus is only appropriate when setting for filing an assignment.  NTRY)  corporation or other private group  is enclosed.  2038 is attached.  charge the required fee(s), or cre lose an extra copy of this form)	n an assignment has beer p entity [ ] governme dit any overpayment, to
[ 1 "Fee Address" indicase TPOSBAYE, Rev 34-02 or Number is required. 3 ASSIGNEE NAME ANDI PLEASE NOTE Unless an previously submitted (V.) NAME OF ASSIGNEE Osram GmbH Please check the appropriate of 14. The following fee(s) are of       Publication Fee (No an	ion (or "Fee Address" Induca more recent) altached. Use RESIDENCE DATA TO BE assignee is identified below USP TO or is being submite assignee category or categorie nelosed: nall entity discount permitte- optes 7	of a Customer  E PRINTED ON ', no assignee dated under separate (B)  Mu dies (will not be pr	agent) and the attorneys or a will be printed will be printed to a will appear on cover. Complete RESIDENCE : anich, German; inted on the path 4b. Payment of Payment (2) The Di Deposit Act	e names of up to 2 registered,  gents If no name is listed, no d.  [print of type]  [print of type]  [print for the patent. Inclusion of assigned of this form is NO I as all  [print for the patent. Inclusion of assigned to the patent.  [print for the patent. Including Inclu	piece data is only appropriate when bestitute for filling an assignment. NTRY)  corporation or other private group is enclosed.  30 % a catached, charge the required fee(s), or cri- lose an extra copy of this form).  MALL ENTITY status. See 37 G	p entity [ ] government has been pentity [ ] government, to

1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450. Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.